



# San Diego County Sheriff's Department

## Arrest/Juvenile Contact Report

CAD Event No.: **S9740037**Case No. **12103753**Case Disposition: **Arrest**Primary Victim: **[E] Albertsons**Report No. **12103753.1****1**  
Page 1 of 7☒**ARREST REPORT**☐**JUVENILE CONTACT REPORT**WARRANT: ☐ LOCAL ☐ OUT**GENERAL CASE INFORMATION**

Primary Charge: <b>148 (A)(1) - PC - OBSTRUCT/RESIST PEACE OFCR/EMER MED TECH (M)</b>			
Special Studies:		Related Cases:	
Location, City, State, ZIP: <b>1301 E Vista Wy, Vista, CA 92084</b>		Occurred On: <b>01/21/2012 18:48:00 (Saturday)</b>	
Jurisdiction: <b>City of Vista - VISTA</b>	Beat: <b>303</b>	Call Source: <b>ADMIN</b>	(and Between):
Means:		Motives:	

**VICTIM/S****Victim #1**

Person Code: <input type="checkbox"/>	Secured Premise <input type="checkbox"/>	Discovered Crime <input type="checkbox"/>	Reporting Party <input type="checkbox"/>	Law Enforcement Officer <input type="checkbox"/>
Name: <b>[E] Albertsons</b>		Victim Type: <b>B - Business</b>		Interpreter Language:
ALIAS / AKA / NICKNAME / MONIKER:				
Name Type:	First:	Middle:	Last:	Suffix:

Victim Of: <b>602.1 (A) - PC - TRESPASS:OBSTRUCT BUSINESS OPERS (M)</b>				County Residence:	
Home Address, City, State, ZIP: <b>1301 E Vista Way, Vista, CA 92084</b>				Res. Country: <b>US</b>	
Race:	Sex:	Date of Birth / Age:	Height:	Weight:	Hair Color:
					Eye Color:
Employment Status:		Occupation/Grade:	Employer/School:	Employer Address, City, State, ZIP:	
CONTACT INFORMATION:					
Type:			Number/Address:		
IDENTIFICATION:					
Type:		Number:		State:	
Country:					
Attire:		Injury:		Extent of Treatment:	
Violent Crime Circumstances:					
LAW ENFORCEMENT OFFICER KILLED OR ASSAULTED INFORMATION		Type:		Type Assignment:	
Type Activity:					

**IBR/UCR OFFENSE/S**

Offense Description: <b>148 (A)(1) - PC - OBSTRUCT/RESIST PEACE OFCR/EMER MED TECH (M)</b>		Level: <b>M</b>	Against:	Completed?: <b>Yes</b>	Counts:	Using:
Location Type: <b>12 - Grocery/Supermarket</b>		Hate/Bias: <b>88 - None (No Bias)</b>		Domestic Violence: <b>No</b>		
Criminal Activity:	Type Security:	Gang Related: <b>No</b>	Entry:	Point of Entry:		
Weapons/Force:	Tools:	Targets:				
Offense Description: <b>602.1 (A) - PC - TRESPASS:OBSTRUCT BUSINESS OPERS (M)</b>		Level: <b>M</b>	Against: <b>SO</b>	Completed?: <b>Yes</b>	Counts:	Using:
Location Type: <b>12 - Grocery/Supermarket</b>		Hate/Bias: <b>88 - None (No Bias)</b>		Domestic Violence: <b>No</b>		
Criminal Activity:	Type Security:	Gang Related: <b>No</b>	Entry:	Point of Entry:		
Weapons/Force:	Tools:	Targets:				

Reporting Officer: <b>SH0760 - PAVLENKO, JACOB</b>	Division / Organization: <b>Vista Station VISTA PATROL</b>	Reviewed By: <b>SH2561 - TWYMAN, GLEN</b>
Report Date: <b>1/21/2012 11:06:09 PM</b>	Detective Assigned: <b>HAMERSCHLAG, MICHAEL</b>	Reviewed Date: <b>01/22/2012 01:56:58</b>



# San Diego County Sheriff's Department Arrest/Juvenile Contact Report

Case No. **12103753**CAD Event No.: **S9740037**Case Disposition: **Arrest**Primary Victim: **[E] Albertsons**Report No. **12103753.1****2**

Page 2 of 7

## ARRESTEE/S

### Arrestee #1

Name: <b>Benes, Alice Eva</b>	County Residence: <b>R - Resident</b>	Interpreter Language:
----------------------------------	------------------------------------------	-----------------------

Name Type:										First:										Middle:										Last:										Suffix:																			
Home Address, City, State, ZIP: <b>(b)(5)(A)</b>																				Res. Country: <b>US</b>										Place of Birth: <b>United States of America (USA)</b>										Undocumented:																			
Race: <b>W</b>					Sex: <b>F</b>					Date of Birth / Age: <b>(b)(5)(A) - 44</b>										Height: <b>5' 6"</b>					Weight: <b>160</b>					Hair Color: <b>BLN</b>					Eye Color: <b>BRO</b>					Facial Hair:										Complexion:									
Hair Style: <b>S - Straight</b>										Hair Length: <b>L - Long</b>										Build: <b>THI - Thin</b>										Teeth: <b>4 - Decayed</b>										Suspected User:																			
Employment Status: <b>U - Unemployed</b>										Occupation/Grade:										Employer/School:										Employer Address, City, State, ZIP:																													

Type: <b>HP - Home Phone</b>																				Number/Address: <b>(b)(5)(A)</b>																			
---------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	-------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Type: <b>DLN - Drivers License Number</b>																				Number: <b>(b)(5)(A)</b>																				State: <b>CA</b>																				Country: <b>US</b>																			
----------------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	-----------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	---------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	-----------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SCARS, MARKS, TATTOOS, ODDITIES:																																							
Attire: <b>white shirt, blue jeans</b>																				Suspect Actions:																			

### ARREST INFORMATION

Arrest Type: <b>S - Cited</b>										LE Disposition: <b>3 - Misdemeanor (Adult Only)</b>										JUS 750 Type: <b>1 - Cited</b>										Citation No.: <b>525281</b>										Booking No.:									
----------------------------------	--	--	--	--	--	--	--	--	--	--------------------------------------------------------	--	--	--	--	--	--	--	--	--	-----------------------------------	--	--	--	--	--	--	--	--	--	--------------------------------	--	--	--	--	--	--	--	--	--	--------------	--	--	--	--	--	--	--	--	--

Arrested For: <b>602.1 (A) - PC - TRESPASS:OBSTRUCT BUSINESS OPERS (M)</b>																				Level: <b>M</b>										Completed: <b>Yes</b>										Counts:									
<b>148 (A)(1) - PC - OBSTRUCT/RESIST PEACE OFCR/EMER MED TECH (M)</b>																				<b>M</b>										<b>Yes</b>																			

Arrested By: <b>SH0760 - PAVLENKO, JACOB</b>										Arrest Date and Time: <b>01/21/2012 18:48:00</b>										Arrest Location, City, State, ZIP: <b>1301 E Vista Way, Vista, CA 92084</b>										Beat: <b>303</b>									
Arrest Assisted By:																				Transported By:																			

Miranda Read: <b>No</b>										Admonished By:										Miranda Response:										Jail Billing Code: <b>SD Sheriff Vista</b>										Booked Location:									
----------------------------	--	--	--	--	--	--	--	--	--	----------------	--	--	--	--	--	--	--	--	--	-------------------	--	--	--	--	--	--	--	--	--	-----------------------------------------------	--	--	--	--	--	--	--	--	--	------------------	--	--	--	--	--	--	--	--	--

Armed With: <b>01 - Unarmed</b>																				Use of Force to effect Arrest: <b>Yes</b>																			
------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	----------------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

### JUVENILES

Adult Present:										Person Notified:										Juvenile Disposition:										Detention Name:									
Parents Notified By:										Notification Method:										Date and Time Notified:										Juvenile Released To:									

### RELEASE INFORMATION

Released Location: <b>TriCity Hospital</b>										Released On: <b>01/21/2012 20:47:00</b>										Released By: <b>SH0760 - PAVLENKO, JACOB</b>										Release Reason: <b>02 - Cite and Release</b>									
-----------------------------------------------	--	--	--	--	--	--	--	--	--	--------------------------------------------	--	--	--	--	--	--	--	--	--	-------------------------------------------------	--	--	--	--	--	--	--	--	--	-------------------------------------------------	--	--	--	--	--	--	--	--	--

### SUSPECT/S (Not Yet Arrested)

#### WITNESSES

### Witness #1

Person Code:		<input type="checkbox"/> Secured Premise	<input type="checkbox"/> Discovered Crime	<input type="checkbox"/> Reporting Party	<input type="checkbox"/> Law Enforcement Officer		
Witness Type Code:		<input type="checkbox"/> 01-Arresting Officer	<input checked="" type="checkbox"/> 06-Other Lay Witness	<input type="checkbox"/> 07-Narc Chemist	<input type="checkbox"/> 12-Other Expert	<input type="checkbox"/> 13-Investigator	<input type="checkbox"/> 14-Other
Name: <b>(b)(5)(B)</b>				Person Code: <b>06 - Other Lay Witness</b>		County Residence: <b>R - Resident</b>	

Reporting Officer: <b>SH0760 - PAVLENKO, JACOB</b>		Division / Organization: <b>Vista Station VISTA PATROL</b>		Reviewed By: <b>SH2561 - TWYMAN, GLEN</b>	
Report Date: <b>1/21/2012 11:06:09 PM</b>		Detective Assigned: <b>HAMERSCHLAG, MICHAEL</b>		Reviewed Date: <b>01/22/2012 01:56:58</b>	



# San Diego County Sheriff's Department Arrest/Juvenile Contact Report

CAD Event No.: **S9740037**Case No. **12103753**Case Disposition: **Arrest**Primary Victim: **[E] Albertsons**Report No. **12103753.1****3**

Page 3 of 7

ALIAS / AKA / NICKNAME / MONIKER:									
Name Type:		First:		Middle:		Last:		Suffix:	
Home Address, City, State, ZIP:				Res. Country:		Place of Birth:		Undocumented:	
(b)(5)(B)								<b>No</b>	
Race:	Sex:	Date of Birth / Age:	Height:	Weight:	Hair Color:	Eye Color:	Facial Hair:		Complexion:
(b)(5)(B)	(b)(5)(B)	(b)(5)(B)	(b)(5)(B)	(b)(5)(B)	(b)(5)(B)	(b)(5)(B)			
Employment Status:		Occupation/Grade:		Employer/School:		Employer Address, City, State, ZIP:			
<b>E - Employed</b>		(b)(5)(B)		(b)(5)(B)		(b)(5)(B)			
CONTACT INFORMATION:									
Type:					Number/Address:				
<b>MP - Mobile Phone</b>					(b)(5)(B)				
Type:					Number/Address:				
<b>WP - Work Phone</b>					(b)(5)(B)				
IDENTIFICATION:									
Type:			Number:			State:		Country:	
<b>SSN - SSN</b>			(b)(5)(B)						
Type:			Number:			State:		Country:	
<b>DLN - Drivers License Number</b>			(b)(5)(B)			<b>CA</b>			
Injury:					Extent of Treatment:				

## Witness #2

Person Code:	<input type="checkbox"/> Secured Premise	<input type="checkbox"/> Discovered Crime	<input type="checkbox"/> Reporting Party	<input type="checkbox"/> Law Enforcement Officer		
Witness Type Code:	<input type="checkbox"/> 01-Arresting Officer	<input type="checkbox"/> 06-Other Lay Witness	<input type="checkbox"/> 07-Narc Chemist	<input type="checkbox"/> 12-Other Expert	<input type="checkbox"/> 13-Investigator	<input type="checkbox"/> 14-Other
Name:			Person Code:		County Residence:	
<b>Pavlenko, J</b>						

ALIAS / AKA / NICKNAME / MONIKER:									
Name Type:		First:		Middle:		Last:		Suffix:	
Home Address, City, State, ZIP:				Res. Country:		Place of Birth:		Undocumented:	
				<b>USA</b>					
Race:	Sex:	Date of Birth / Age:	Height:	Weight:	Hair Color:	Eye Color:	Facial Hair:		Complexion:
	<b>M</b>								
Employment Status:		Occupation/Grade:		Employer/School:		Employer Address, City, State, ZIP:			
<b>E - Employed</b>		<b>Deputy Sheriff</b>		<b>SDSD</b>		<b>325 S Melrose Dr, Vista, CA 92081</b>			
CONTACT INFORMATION:									
Type:					Number/Address:				
<b>WP - Work Phone</b>									
IDENTIFICATION:									
Type:			Number:			State:		Country:	
<b>SH - Sheriff ID</b>			<b>0760</b>						
Injury:					Extent of Treatment:				

## Witness #3

Person Code:	<input type="checkbox"/> Secured Premise	<input type="checkbox"/> Discovered Crime	<input type="checkbox"/> Reporting Party	<input type="checkbox"/> Law Enforcement Officer		
Witness Type Code:	<input type="checkbox"/> 01-Arresting Officer	<input checked="" type="checkbox"/> 06-Other Lay Witness	<input type="checkbox"/> 07-Narc Chemist	<input type="checkbox"/> 12-Other Expert	<input type="checkbox"/> 13-Investigator	<input type="checkbox"/> 14-Other
Name:			Person Code:		County Residence:	
(b)(5)(B)			<b>06 - Other Lay Witness</b>		<b>R - Resident</b>	

ALIAS / AKA / NICKNAME / MONIKER:									
Name Type:		First:		Middle:		Last:		Suffix:	
Home Address, City, State, ZIP:				Res. Country:		Place of Birth:		Undocumented:	
(b)(5)(B)								<b>No</b>	
Race:	Sex:	Date of Birth / Age:	Height:	Weight:	Hair Color:	Eye Color:	Facial Hair:		Complexion:
(b)(5)(B)	(b)(5)(B)	(b)(5)(B)	(b)(5)(B)	(b)(5)(B)	(b)(5)(B)	(b)(5)(B)			
Employment Status:		Occupation/Grade:		Employer/School:		Employer Address, City, State, ZIP:			
<b>E - Employed</b>		(b)(5)(B)		(b)(5)(B)		(b)(5)(B)			

Reporting Officer	Division / Organization	Reviewed By
<b>SH0760 - PAVLENKO, JACOB</b>	<b>Vista Station VISTA PATROL</b>	<b>SH2561 - TWYMAN, GLEN</b>
Report Date	Detective Assigned	Reviewed Date
<b>1/21/2012 11:06:09 PM</b>	<b>HAMERSCHLAG, MICHAEL</b>	<b>01/22/2012 01:56:58</b>



# San Diego County Sheriff's Department Arrest/Juvenile Contact Report

CAD Event No.: **S9740037**  
Primary Victim: **[E] Albertsons**

Case No. **12103753**  
Case Disposition: **Arrest**  
Report No. **12103753.1**

**4**  
Page 4 of 7

CONTACT INFORMATION:			
Type: <b>MP - Mobile Phone</b>	Number/Address: <b>(b)(5)(B)</b>		
Type: <b>WP - Work Phone</b>	Number/Address: <b>(b)(5)(B)</b>		
IDENTIFICATION:			
Type: <b>DLN - Drivers License Number</b>	Number: <b>(b)(5)(B)</b>	State: <b>CA</b>	Country:
Injury:		Extent of Treatment:	

## Witness #4

Person Code:	<input type="checkbox"/> Secured Premise	<input type="checkbox"/> Discovered Crime	<input type="checkbox"/> Reporting Party	<input checked="" type="checkbox"/> Law Enforcement Officer		
Witness Type Code:	<input type="checkbox"/> 01-Arresting Officer	<input type="checkbox"/> 06-Other Lay Witness	<input type="checkbox"/> 07-Narc Chemist	<input type="checkbox"/> 12-Other Expert	<input type="checkbox"/> 13-Investigator	<input type="checkbox"/> 14-Other
Name: <b>Leyva, F</b>			Person Code: <b>L - Law Enforcement Officer</b>	County Residence:		

ALIAS / AKA / NICKNAME / MONIKER:								
Name Type:	First:	Middle:	Last:	Suffix:				
Home Address, City, State, ZIP: <b>325 South Melrose Drive, Vista, CA 92081</b>			Res. Country:	Place of Birth:	Undocumented:			
Race:	Sex:	Date of Birth / Age:	Height:	Weight:	Hair Color:	Eye Color:	Facial Hair:	Complexion:
Employment Status: <b>E - Employed</b>	Occupation/Grade: <b>Deputy Sheriff</b>	Employer/School: <b>San Diego Sheriff's Department</b>			Employer Address, City, State, ZIP: <b>325 S Melrose Dr, Vista, CA 92081</b>			
CONTACT INFORMATION:								
Type: <b>WP - Work Phone</b>	Number/Address: <b>(b)(5)(B)</b>							
IDENTIFICATION:								
Type: <b>SH - Sheriff ID</b>	Number: <b>3394</b>	State:			Country:			
Injury:		Extent of Treatment:						

## OTHER ENTITIES

## PROPERTY

### Property Item #1.000 - CD-ROM w/ photos

Derivative No.: <b>0</b>	Property Category: <b>1311 - Recording - Interview or Case related - Video/Photo CD, DVD, Tape, Film, Digital storage, Negative</b>		
Status: <b>ES - Evidence (Seized)</b>	Count: <b>1</b>	Value: <b>\$1.00</b>	
Manufacturer:	Model:		
Serial No.:	Model Year:	OAN:	
Color:	Caliber:		
Body Style:	Recovered/ Seized Date: <b>01/21/2012</b>		
Owner:	Disposition:		
Evidence Tag:	Alert(s):		
Drug Type:	Drug Quantity:		
Search Warrant:			
Notes:			

## REPORT NARRATIVE

Case #: 12103753

## SYNOPSIS:

Reporting Officer <b>SH0760 - PAVLENKO, JACOB</b>	Division / Organization <b>Vista Station VISTA PATROL</b>	Reviewed By <b>SH2561 - TWYMAN, GLEN</b>
Report Date <b>1/21/2012 11:06:09 PM</b>	Detective Assigned <b>HAMERSCHLAG, MICHAEL</b>	Reviewed Date <b>01/22/2012 01:56:58</b>





# San Diego County Sheriff's Department Arrest/Juvenile Contact Report

Case No. **12103753**

CAD Event No.: **S9740037**

Case Disposition: **Arrest**

Primary Victim: **[E] Albertsons**

Report No. **12103753.1**

**5**

Page 5 of 7

Alice Benes was inside the Albertson's grocery store at the US Bank inside the store. Benes was yelling and screaming at the employees. The manager at Albertson's, (b)(5)(B) called the Sheriff's department because Benes would not leave the store. When I arrived Benes was yelling and screaming about things that were not making sense. I asked her to come outside so we would not create any more of a disturbance inside the store. Benes walked outside with me and (b)(5) followed. (b)(5) told me he wanted Benes arrested for trespassing because she had done this several times earlier in the day. When Benes heard (b)(5) say that she tried to walk away. I had to grab her arm to keep her from getting away. A short struggle ensued and during a control hold of Benes's right arm I heard her arm break and it went limp. I requested paramedics and held Benes on the ground until medics arrived. Benes was transported to Tri City Hospital for treatment. I issued Benes a citation at the hospital for trespassing and for resisting a peace officer. Benes was released at the hospital so she could get treatment for her injury.

## ORIGIN:

On 01-21-12, at about 1833 hours, I received a radio call, (CAD# 9740037), to investigate a customer causing a disturbance at the US Bank inside Albertson's, located at 1301 E. Vista Way in the city of Vista.

## BACKGROUND:

On 01-20-12 at about 1818 hours, I responded to a similar call reference Benes doing the same thing. When I arrived she had already left the business. On 01-21-12 at about 1350 hours, day shift units responded to a similar call about Benes at the same location. The call stated Benes was gone when they arrived as well.

## INVESTIGATION:

I arrived at the location at about 1842 hours, and was met outside by (b)(5) (b)(5) told me Benes had been inside the store screaming and frightening customers for some time. I walked inside the store and to the area of the bank. Benes was standing at the bank counter and she was yelling at the teller. Benes was not making sense with what she was yelling. I told Benes to keep her voice down several times so I could help her resolve any problems she had. Benes continued to yell and scream so I asked her to talk to me outside.

I walked with Benes outside the store near my patrol car. (b)(5) followed us outside and he was standing near us as I spoke with Benes. I was trying to ask Benes what the problem was and she just continued to scream and yell about things that did not make sense. I asked (b)(5) what had happened with the incident earlier in the day. (b)(5) told me they gave her a trespass letter telling her they did not want her to come back anymore. I asked (b)(5) if he wanted Benes arrested for trespassing and he said, "Yes."

Reporting Officer <b>SH0760 - PAVLENKO, JACOB</b>	Division / Organization <b>Vista Station VISTA PATROL</b>	Reviewed By <b>SH2561 - TWYMAN, GLEN</b>
Report Date <b>1/21/2012 11:06:09 PM</b>	Detective Assigned <b>HAMERSCHLAG, MICHAEL</b>	Reviewed Date <b>01/22/2012 01:56:58</b>



# San Diego County Sheriff's Department Arrest/Juvenile Contact Report

Case No. **12103753**

CAD Event No.: **S9740037**

Case Disposition: **Arrest**

Primary Victim: **[E] Albertsons**

Report No. **12103753.1**

**6**

Page 6 of 7

When (b)(5) said he wanted Benes arrested, Benes tried to walk away. Benes said "I am not going to jail!" I told Benes to stop and I grabbed the sleeve on her right arm. Benes tried to pull away from me. I felt Benes was trying to get away from me. Based on her irrational behavior I was worried if I did not gain control of her immediately she would get violent toward me. Her behavior had been boisterous and unpredictable and I felt she was capable of attacking me if she felt it would help her escape. I quickly placed her right arm in a wrist lock behind her back. As I put her arm in the wrist lock I shoved her body toward the trunk of my patrol car. I wanted to limit her movement by placing her body between me and the car. I told Benes several times to put her other hand behind her back. I requested a cover unit for assistance. Benes did not comply and she kept trying to pull out of my hold. Benes then twisted her body and I heard a loud snap. At the same time I heard the snap her arm went limp and I could tell the bone had broken. The break startled me and I released my hold of her arm. Benes's movement trying to get away from me in combination with me releasing my grip caused her to fall to the ground.

I knew her injury was serious and she looked like she was going to try and get up. Benes was on her right side on the ground and I applied body weight pressure with my knees on her left side hip and torso. I wanted to keep Benes from getting up. I did not want her to make the injury any worse by moving or to try and get away. I did not attempt to place handcuffs on her because of her injury. I requested the paramedics so Benes could be treated for her injury. Deputy Bailey (#7153) and Deputy Weston (#7558) arrived a short time later and assisted me in keeping Benes on the ground on her side. Deputy Leyva (#3394) responded to the scene and took a statement from (b)(5) see his report for details.

Vista Fire Department paramedics responded to the scene and Benes was transported to Tri City Hospital by ambulance for treatment. I followed the ambulance to the hospital. While at the hospital Sgt. Menzies (#2036) from Division of Inspectional Services responded to the hospital. I gave Sgt. Menzies a brief statement about the incident.

I was informed by staff at the hospital that Benes was likely going to be admitted. I issued Benes a citation (#525281) for trespassing and resisting a peace officer. I took digital photographs of Benes's injury. The photos were later downloaded to a CD-ROM and placed into evidence. I released Benes at the hospital so she could be treated for her injury.

I returned to the Albertson's to hav [REDACTED] sign a citizen's arrest declaration.

## STATEMENTS:

A statement from (b)(5) was taken by Deputy Leyva.

## EVIDENCE:

A CD-ROM with four digital photographs was placed into evidence at the Vista Station.

## INJURIES:

Reporting Officer <b>SH0760 - PAVLENKO, JACOB</b>	Division / Organization <b>Vista Station VISTA PATROL</b>	Reviewed By <b>SH2561 - TWYMAN, GLEN</b>
Report Date <b>1/21/2012 11:06:09 PM</b>	Detective Assigned <b>HAMERSCHLAG, MICHAEL</b>	Reviewed Date <b>01/22/2012 01:56:58</b>



## San Diego County Sheriff's Department Arrest/Juvenile Contact Report

Case No. **12103753**

CAD Event No.: **S9740037**

Case Disposition: **Arrest**

Primary Victim: **[E] Albertsons**

Report No. **12103753.1**

**7**  
Page 7 of 7

Benes suffered a broken right arm and was hospitalized for treatment.

PROPERTY DAMAGE: None

### RELATED REPORTS:

Deputy's report by Deputy Leyva  
Cite #525281

Reporting Officer <b>SH0760 - PAVLENKO, JACOB</b>	Division / Organization <b>Vista Station VISTA PATROL</b>	Reviewed By <b>SH2561 - TWYMAN, GLEN</b>
Report Date <b>1/21/2012 11:06:09 PM</b>	Detective Assigned <b>HAMERSCHLAG, MICHAEL</b>	Reviewed Date <b>01/22/2012 01:56:58</b>

Court Copy  
San Diego County Sheriff's Department

525281

NOTICE TO APPEAR

☐ Traffic ☐ Nontraffic ☒ Misdemeanor

Date of Violation 01-21-12 Time 10:48 AM Day of Week S M T W T F S Case Number 12103753  
Name (First, Middle, Last) ALICE EVA BENES ☐ Owner's Responsibility (VC 40001)

Address

City VISTA State CA ZIP Code 92084

Driver's License Number [REDACTED] State CA Class 1D Commercial Lic. ☐ Yes ☒ No Birth Date [REDACTED] Age 44

Sex F Hair BRN Eyes BLU Height 5-6 Weight 130 Race W ☐ Commercial Veh. (VC 15210(b))

Vehicle License Number / VIN [REDACTED] State [REDACTED] ☐ Hazardous Material (VC353)

Year [REDACTED] Make [REDACTED] Model [REDACTED] Body Style [REDACTED] Color [REDACTED]

Registered Owner or Lessee PED ☐ Same as Driver

Address [REDACTED] ☐ Same as Driver

City [REDACTED] State [REDACTED] Zip Code [REDACTED] ☐ Evidence of Financial Responsibility

Yes	No	Violation Code and Section	Description	Misdemeanor or Infraction (Circle)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	602.1(a) PC	TRESSPASS	(M) I
<input type="checkbox"/>	<input checked="" type="checkbox"/>	148(a)(1) PC	RESIST PEACE OFFICER	I
<input type="checkbox"/>	<input type="checkbox"/>			M I
<input type="checkbox"/>	<input type="checkbox"/>			M I

☐ Booking Required (see reverse)

Speed Approx. P.F. Max. Veh. Lmt. Safe Spd. Radar Beat 303 ☐ Continuation Form Issued

Location of Violation(s) 1301 E. VISTA WAY City of Occurrence VISTA ☐ Unincorp.

Weather Conditions Road Conditions Traffic Conditions Station/Sub-Stn. Division VPS PAT

☐ Violations not committed in my presence, declared on information and belief.  
I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.



# San Diego County SHERIFF'S DEPARTMENT

## CITIZEN ARREST DECLARATION

Case Number 12103753

Incident Number 9740037

I have arrested ALICE BENES DOB (b)(5)(A)

- ☒ For a public offense committed or attempted in my presence.
- ☐ When the person arrested has committed a felony, although not in my presence.
- ☐ When a felony has in fact been committed, and I have reasonable cause to believe the person arrested to have committed it.

I realize that by making a citizen's arrest, or requesting a peace officer to take physical custody of someone on my behalf, that I am civilly responsible for all actions resulting from that arrest, regardless of the final disposition of the case.

Pursuant to penal code section 849(b)(1), any peace officer may release from custody any person if he/she is satisfied that there are insufficient grounds for making a criminal complaint against the person arrested.

I hereby release and hold harmless the County of San Diego, the San Diego County Sheriff's Department, its officers, agents, and employees from any and all claims, demands, causes of action, or obligations whatsoever arising out of this arrest.

(b)(5)(B)

Sign

Date: 1/21/12

### ARRESTING CITIZEN'S INFORMATION (PLEASE PRINT)

NAME (L,F,M) (b)(5)(B)

WORK

HOME-ADDRESS: (b)(5)(B)

MOBILE  
PHONE: (b)(5)(B)

RACE (b)(5)(B)

SEX (b)(5)(B)

DOB (b)(5)(B)

I.D. TYPE / ID# (b)(5)(B)

REPORTING OFFICER	ID#	DIVISION	DATE OF REPORT	APPROVED BY
<u>J. PAVLENKO</u>	<u>0760</u>	<u>3187C</u>		





# San Diego County Sheriff's Department Officer Report

CAD Event No.

Case No. **12103753**Report No. **4747****1**

Page 1 of 2

**GENERAL CASE INFORMATION**

Special Studies:		Related Cases:	
Location, City, State, ZIP: <b>1301 E Vista Way, Vista, CA 92081</b>		Occurred On: <b>1/21/2012 6:48:00 PM (Saturday)</b>	
Jurisdiction: <b>City of Vista - VISTA</b>	Beat: <b>306</b>	Call Source:	(and Between):

**INDIVIDUAL/S**

Name: <b>Benes, Alice Eva</b>				Person Code:		Interpreter Language:	
ALIAS / AKA / NICKNAME / MONIKER:							
Home Address, City, State, ZIP: <b>(b)(5)(A)</b>				Res. Country: <b>US - UNITED STATES</b>		County Residence: <b>R Resident</b>	
Race: <b>W</b>		Sex: <b>F</b>		Date of Birth / Age: <b>(b)(5)(A) - 44</b>		Height: <b>5' 6"</b>	
Weight: <b>160 lbs</b>		Hair Color: <b>BLN</b>		Eye Color: <b>BRO</b>		Facial Hair:	
Complexion:		Employment Status:		Occupation/Grade:		Employer/School:	
Employer Address, City, State, ZIP:							
CONTACT INFORMATION							
Type: <b>HP - Home Phone</b>				Number/Address: <b>(b)(5)(A)</b>			
IDENTIFICATION:							
Type: <b>DLN - Drivers License Number</b>		Number: <b>(b)(5)</b>		State: <b>CA - California</b>		Country: <b>US - UNITED STATES</b>	
Attire: <b>white shirt, blue jeans</b>		Injury:		Extent Of Treatment:		Violent Crime Circumstances:	
Subject Injury Description:							
Officer Injury Description:							

**REPORT NARRATIVE****ORIGIN:**

On 1/21/2012, I assisted Deputy Pavlenko #0760 by obtaining witness statements from two employees of Albertson's related to CAD# 9740037 at 1301 E Vista Way in the City of Vista, Ca.

**OBSERVATIONS AND ACTIONS:**

I contacted **(b)(5)(B)** and **(b)(5)(B)** obtained their statements.

**STATEMENT OF **(b)(5)(B)** ITNESS):**

**(b)(5)(B)** essentially told me today at 1337 hours, Alice Benes walked into the Albertson's Grocery Store and started yelling obscenities at customers inside. **(b)** approached her and asked her to leave the store and not return. Benes exited the store and then quickly returned continuing to yell and scream at customers. Benes also shoved a Store Director when she entered the store. **(b)** then called the Sheriff's Department to report the incident. Prior to Benes leaving the store, **(b)** completed a notice of trespass and attempted to have Benes sign it however she refused and left the area on foot.

A few hours later, Benes returned to the store and he immediately called the Sheriff's Department and requested a deputy respond. He said when the deputy arrived he escorted Benes out of the store and towards his patrol car. Benes was cooperative at first. **(b)** said, he heard Benes say, "I'm gonna run" and then he saw the deputy grab her right arm. He heard Benes yell, "I'm not gonna let you rape me." He watched as Benes began struggling with the deputy and was trying to pull away from him. He saw the deputy attempt to push Benes up against his patrol car when the she lost her footing and fell to the ground. The deputy then held her down until his cover deputies arrived to assist. He believes had the deputy not held her down she would have got up and attempted to run away.

**STATEMENT OF **(b)(5)(B)** (WITNESS):**

**(b)(5)(B)** essentially said, he saw Benes enter the store earlier in the day and begin yelling curse words at customers. He was with **(b)** when she was asked to leave the store and not return. He saw **(b)** attempt to have Benes sign a trespass letter and she refused. She then left the store. Later the same day, he saw that Benes had returned to the store. He watched as the deputy arrived to the store and escorted her out of the store. He did not see anything else.

Reporting Officer <b>SH3394 - LEYVA, FRANK</b>	Division / Organization <b>VPS_PAT / VPS - Vista Station</b>	Reviewed By <b>SH2561 - TWYMAN, GLEN</b>
Report Date <b>1/22/2012 12:41:51 AM</b>	Detective Assigned <b>HAMERSCHLAG, MICHAEL</b>	Reviewed Date <b>1/22/2012 2:01:18 AM</b>



# San Diego County Sheriff's Department Officer Report

CAD Event No.

Case No. **12103753**

Report No. **4747**

**2**

Page 2 of 2

RELATED REPORTS:  
CN-12103753

Reporting Officer <b>SH3394 - LEYVA, FRANK</b>	Division / Organization <b>VPS_PAT / VPS - Vista Station</b>	Reviewed By <b>SH2561 - TWYMAN, GLEN</b>
Report Date <b>1/22/2012 12:41:51 AM</b>	Detective Assigned <b>HAMERSCHLAG, MICHAEL</b>	Reviewed Date <b>1/22/2012 2:01:18 AM</b>



# San Diego County Sheriff's Department Evidence Report

Case No: **12103753**Evidence Sheet No: **001****1**

Page 1 of 1

**GENERAL CASE INFORMATION**

REPORTING AGENCY: <b>SH - Sheriff</b>				
CALL FOR SERVICE NUMBER (CAD) <b>S9740037</b>	OFFENSE TYPE: <b>148 (A)(1) - PC - OBSTRUCT/RESIST PEACE OFCR/EMER MED TECH (M)</b>	DIVISION: <b>VPS - Vista Station</b>	BILLING CODE: <b>SOVI - SD Sheriff Vista</b>	SEARCH WARRANT NUMBER:
DATE OF INCIDENT: <b>1/21/2012</b>	INCIDENT LOCATION (CITY, STATE, ZIP): <b>1301 E VISTA WY, VISTA</b>			KEY CASE NUMBER:
REPORTING OFFICER: <b>SH0760 - PAVLENKO, JACOB</b>		ID: <b>SH0760</b>	DIVISION: <b>ASTREA</b>	
ASSIGNED DETECTIVE: <b>HAMERSCHLAG, MICHAEL</b>		ID:	DIVISION: <b>Central Operations Detail</b>	

**OUTSIDE AGENCY**

OA CASE NUMBER:	AGENCY NAME:	ASSIGNED DETECTIVE:	CONTACT PHONE:
	AGENCY ADDRESS (CITY, STATE, ZIP):		

**INVOLVED PEOPLE**

AFFILIATION: <b>SUS2</b>	NAME (Last, First, Middle): <b>BENES, ALICE EVA</b>	DOB: <b>(b)(5)(A)</b>	AGE: <b>44</b>	SEX: <b>F - Female</b>	RACE:
	HOME ADDRESS (CITY, STATE, ZIP): <b>(b)(5)(A)</b>	HOME PHONE: <b>(b)(5)(A)</b>			
AFFILIATION: <b>VIC1</b>	NAME (Last, First, Middle): <b>[E] ALBERTSONS</b>	DOB:	AGE:	SEX:	RACE:
	HOME ADDRESS (CITY, STATE, ZIP): <b>1301 E Vista Wy VISTA, CA 92084</b>	HOME PHONE:			

**EVIDENCE INFORMATION SECTION**

FIN <b>1.1</b>	OA Item/TAG #	PROPERTY DESCRIPTION: <b>PHOTO DISC</b>	
VALUE:	QUANTITY: <b>0</b>	MAKE / MANUFACTURER:	MODEL:
CALIBER:	SERIAL NUMBER:	PROPERTY TYPE: <b>1302 - Laser Disc</b>	
PROPERTY STATUS: <b>ES - Evidence (Seized)</b>		SEARCH WARRANT:	
PROPERTY DISPOSITION: <b>Disposed</b>		DATE/TIME RECVRD / SEIZED: <b>1/21/2012</b>	CSI
DRUG TYPE:		DRUG QUANTITY:	DRUG MEASURE:
NOTES:			

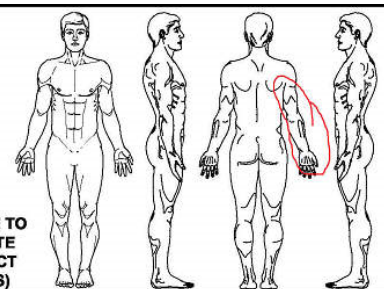
\* I 1 2 4 1 6 1 8 \*





# San Diego County Sheriff's Department

## Use of Force Supplemental

UOF DATE AND TIME 1/21/2012 18:48	EVENT NUMBER S9740037	CASE NUMBER 12103753	DOCUMENT NUMBER 4746	STATION/FACILITY VPS - Vista Station
INCIDENT DESCRIPTION / OFFENSES 148PC				
SUBJECT'S NAME (LAST, FIRST, MI) Benes, Alice Eva		DATE OF BIRTH (b)(5)(A)	ARRESTED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	SUPERVISOR PRESENT <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
DATE/TIME SUPERVISOR NOTIFIED 01/21/2012 19:00				
<b>REASON(S) FOR USING FORCE:</b> <input checked="" type="checkbox"/> Necessary to effect an arrest <input type="checkbox"/> Necessary to prevent a violent forcible felony <input type="checkbox"/> Delaying Jail Operations <input type="checkbox"/> Necessary to defend self or another <input type="checkbox"/> Necessary to restrain for subject's safety <input checked="" type="checkbox"/> Necessary to prevent escape/evasion <input type="checkbox"/> Necessary during high-risk incident <input type="checkbox"/> Necessary to effect a lawful detention <input type="checkbox"/> Necessary during riot				
SUBJECT APPEARED TO BE <input type="checkbox"/> Under the influence of alcohol and/or drugs <input checked="" type="checkbox"/> Mentally impaired		NUMBER OF OFFICERS ON SCENE 1		NUMBER OF OFFICERS USING FORCE 1
<b>LEVEL(S) OF RESISTANCE ENCOUNTERED</b> <input type="checkbox"/> NONE (subject cooperated/complied) <input type="checkbox"/> PSYCHOLOGICAL INTIMIDATION (non-verbal cues indicating subject's attitude or physical readiness to resist) <input checked="" type="checkbox"/> VERBAL NON-COMPLIANCE (subject's expressed unwillingness to comply with the officer's commands) <input checked="" type="checkbox"/> PASSIVE RESISTANCE (represents by a refusal to respond to verbal commands but also offers no form of physical resistance) <input checked="" type="checkbox"/> ACTIVE RESISTANCE (pushing, pulling or running away from the officer to avoid control; not attempting to harm the officer) <input type="checkbox"/> ASSAULTIVE BEHAVIOR (physical actions of assault) <input type="checkbox"/> AGGRAVATED ACTIVE AGGRESSION (potential injury or death)				
<b>LAW ENFORCEMENT TOOL/TECHNIQUE USED TO GAIN COMPLIANCE OR OVERCOME RESISTANCE (CHECK ALL THAT APPLY)</b> <input checked="" type="checkbox"/> <b>Verbal Commands:</b> "Put you other hand behind your back" <input checked="" type="checkbox"/> <b>Empty Hand Control</b> <input checked="" type="checkbox"/> Grab, Push, Pull, or Body Weight <input checked="" type="checkbox"/> Control Hold (Duration: 10 sec) <input type="checkbox"/> Pressure Point (Duration: ) (# of Contacts: ) <input type="checkbox"/> Strike (Body part used: ) (# of Contacts: ) <input type="checkbox"/> Takedown Type: _____ <input type="checkbox"/> Carotid (Rendered Unconscious? <input type="checkbox"/> Yes <input type="checkbox"/> No) (Duration: ) <input type="checkbox"/> <b>Tool/Device/Weapon</b> <input type="checkbox"/> OC Agent (Duration: ) (# of Contacts: ) <input type="checkbox"/> Decontaminated <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cord Cuff Restraint Device (Duration: ) <input type="checkbox"/> Impact Weapon (# of Contacts: ) Type: _____ <input type="checkbox"/> Canine (Duration: ) (# of Contacts: ) <input type="checkbox"/> Vehicle/Forcible Stop <input type="checkbox"/> Weapon Pointed at Subject (Duration: ) Type: _____ <input type="checkbox"/> Spit Sock (Duration: ) <input type="checkbox"/> Pro-Strait Chair <input type="checkbox"/> Tactical Shield <input type="checkbox"/> WRAP <input type="checkbox"/> <b>Less-Lethal Weapon System Discharged</b> <input type="checkbox"/> PepperBall - OC Powder <input type="checkbox"/> PepperBall - Water <input type="checkbox"/> 37 mm Rifle - Standard <input type="checkbox"/> 37 mm Rifle - Low Energy <input type="checkbox"/> 40 mm Rifle - Bean Bag <input type="checkbox"/> 40 mm Rifle - Sponge <input type="checkbox"/> Taser - Probes <input type="checkbox"/> Taser - Drive Stuns <input type="checkbox"/> Stingball Grenade <input type="checkbox"/> Sound/Light device <input type="checkbox"/> 12-Gauge Super Sock <input type="checkbox"/> Ultron/NOVA Shield <input type="checkbox"/> REACT Belt <input type="checkbox"/> <b>Firearm</b> <input type="checkbox"/> Type: _____ <input type="checkbox"/> <b>Other:</b> _____				
WAS INITIAL USE OF FORCE EFFECTIVE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		WAS ADDITIONAL CONTROL OR FORCE NEEDED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
SUBJECT INJURED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		EXTENT OF TREATMENT <input type="checkbox"/> None <input type="checkbox"/> Treated at hospital <input type="checkbox"/> Treated at scene <input checked="" type="checkbox"/> Hospitalized <input type="checkbox"/> Refused treatment		
OFFICER(S) INJURED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		EXTENT OF TREATMENT <input checked="" type="checkbox"/> None <input type="checkbox"/> Treated at hospital <input type="checkbox"/> Treated at scene <input type="checkbox"/> Hospitalized <input type="checkbox"/> Refused treatment		
SUBJECT INJURY DESCRIPTION		OFFICER INJURY DESCRIPTION		
OTHER FORCE USED/COMMENTS/EQUIPMENT PERFORMANCE:				
SERGEANT		ARJIS	DATE	
LIEUTENANT		ARJIS	DATE	
CAPTAIN		ARJIS	DATE	
 MARK FIGURE TO INDICATE CONTACT POINT(S)				



# San Diego County Sheriff's Department

## Use of Force Supplemental

### Use of Force Supplemental Instructions

**Lines 1 & 3:** Fill in the blanks.

**Line 2:** If the suspect was committing a crime and force was used to stop or apprehend the subject, document the appropriate penal code. If the UOF occurred in the performance of the officer's duties, document the incident description, i.e. officer transport, officer escort, making arrest, detaining suspect, cell extraction etc.

**Primary Reason for Using Force:** Check appropriate box(s).

**Subject Appeared To Be:** Check if applicable.

**Number of Officers on Scene:** List number of officers present.

**Number of Officers Using Force:** List number of officers that used force.

**Level(s) of Resistance Encountered:** Check appropriate box(s).

**L.E. Tool/Technique Used:** Check appropriate box(s). If known and/or applicable, include duration (approximate length of time) tool/technique was used. If known and/or applicable, include the number of contacts (approximate number of strikes, impacts, etc.) when requested on form.

**Was Initial Use of Force Effective?** If initial force used was effective, check "Yes." If initial force used was ineffective and additional force was necessary, check "No."

**Was Additional Control or Force Needed:** If initial force used was ineffective and additional force was necessary, check "Yes." If initial force used was effective, check "No."

**Target Distance:** If applicable (refers primarily to less lethal weapon systems), approximate distance or provide range (i.e. 7-15 feet, 15-20 yards, etc.) from subject during application of force.

**Subject Injured:** Check "Yes" if medically treated for injury sustained as a possible result of force applied by a officer(s) – does not include previous injuries suffered prior to officer contact. Check "No" if subject was not injured or simply complains of injury/pain suffered as a result of force applied by an officer(s) and refuses medical attention. Any complaints of pain shall be documented in the use of force report narrative (whenever any physical force used by a officer results in a complaint of injury or an injury that necessitates medical treatment of a subject, a supervisor will be notified immediately).

**Extent of Treatment:** Check appropriate box. Check none if subject was evaluated and no treatment was required. Specifically, check "Treated at Scene" if subject was treated at scene by EMS for injuries that may have resulted due to force applied by officer(s). Check "Treated at Hospital" if subject was transported to hospital for treatment of injuries that may have been sustained as an apparent result of force applied by officer(s). Check "Hospitalized" if subject was admitted to the Hospital as a result of injuries that were sustained as a result of force applied by officer(s).

**Officer Injured:** Check appropriate box (see above).

**Extent of Treatment:** Check appropriate box. Check none if officer was evaluated and no treatment was required. Specifically, check "Treated at Scene" if officer was treated at scene by EMS for injuries. Check "Treated at Hospital" if officer was transported to hospital for treatment of injuries. Check "Hospitalized" if officer was admitted to the Hospital as a result of injuries.

**Other Force Used/Comments/Equipment Performance:** This section can be used to document other force options not listed on the form; relevant comments about the incident such as complaints of pain/injury (room permitting) and negative/positive comments regarding equipment performance.

**Mark Figure to Indicate Contact Points:** When applicable, mark the areas on the figure where applied force contacted the subject's body.

**Sergeant:** Sign, list ARJIS number and date reviewed.

**Lieutenant:** Sign, list ARJIS number and date reviewed.

**Captain:** Sign, list ARJIS number and date reviewed.



# San Diego County Sheriff's Department Officer Report

CAD Event No. **S9740037**Case No. **12103753**Report No. **4746****1**

Page 1 of 1

**GENERAL CASE INFORMATION**

Special Studies:		Related Cases:	
Location, City, State, ZIP: <b>1301 E Vista Wy, Vista, CA 92084</b>		Occurred On: <b>1/21/2012 6:48:00 PM (Saturday)</b>	
Jurisdiction: <b>City of Vista - VISTA</b>	Beat: <b>306</b>	Call Source:	(and Between):

**INDIVIDUAL/S**

Name: <b>Benes, Alice Eva</b>				Person Code:		Interpreter Language:	
ALIAS / AKA / NICKNAME / MONIKER:							
Home Address, City, State, ZIP: <b>(b)(5)(A)</b>				Res. Country: <b>US - UNITED STATES</b>		County Residence: <b>R Resident</b>	
Race: <b>W</b>		Sex: <b>F</b>		Date of Birth / Age: <b>(b)(5)(A) - 44</b>		Height: <b>5' 6"</b>	
Weight: <b>160 lbs</b>		Hair Color: <b>BLN</b>		Eye Color: <b>BRO</b>		Facial Hair:	
Complexion:		Employment Status: <b>U - Unemployed</b>		Occupation/Grade:		Employer/School:	
Employer Address, City, State, ZIP:		CONTACT INFORMATION					
Type: <b>HP - Home Phone</b>		Number/Address: <b>(b)(5)(A)</b>					
IDENTIFICATION:							
Type: <b>DLN - Drivers License Number</b>		Number: <b>(b)(5)</b>		State: <b>CA - California</b>		Country: <b>US - UNITED STATES</b>	
Attire: <b>white shirt, blue jeans</b>		Injury: <b>Yes</b>		Extent Of Treatment: <b>4 - Hospitalized</b>		Violent Crime Circumstances:	
Subject Injury Description:							
Officer Injury Description:							

**REPORT NARRATIVE**

See arrest report

Reporting Officer <b>SH0760 - PAVLENKO, JACOB</b>	Division / Organization <b>VPS_PAT / VPS - Vista Station</b>	Reviewed By <b>SH2561 - TWYMAN, GLEN</b>
Report Date <b>1/21/2012 11:20:28 PM</b>	Detective Assigned <b>HAMERSCHLAG, MICHAEL</b>	Reviewed Date <b>1/22/2012 2:03:33 AM</b>









Adult T1

9 7 8 6 0 1 2 1 1  
wye32  
2534cm







